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As a below named Inventor, I hereby declare that:				
My residence, post office address, and citizenship are as stated next to my name.				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
“SUPPORTING DEVICE”				
<i>(Title of the Invention)</i>				
the specification of which				
<input type="checkbox"/> is attached hereto OR				
<input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) 08/28/1999 as United States Application Number or PCT International				
Application Number PCT/EP99/06337 and was amended on (MM/DD/YYYY) 00/00/0000 (if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.				
I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes No
198 39 359.8	DE	08/28/1998		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:				
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.				
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.		

(July 1996)

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP99/06338	08/28/1999	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
HUDAK, Daniel J.	25,879	TYRPAK, Michele M.	42,192
SHUNK, Laura F.	31,423	HUDAK, Daniel J. Jr.	P-47,669
ROTE, Frank C. Jr.	20,395		
SHUST, Nestor, W.	23,034		

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	HUDAK & SHUNK CO., L.P.A.				
Address	7 West Bowery Street, Suite 808				
Address					
City	Akron	State	Ohio	ZIP	44308-1133
Country	US	Telephone	330-535-2220	Fax	330-535-1435

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name	José Manuel	Middle Initial		Family Name	ALGUERA GALLEG0	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Aschaffenburg	State		Country	Germany	Citizenship	ES
Post Office Address	Bessenbacher Weg 85						
Post Office Address							
City	Aschaffenburg	State		ZIP	D-63739	Country	Germany

☒ Additional inventors are being named on supplemental sheet(s) attached hereto.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Gerald				Middle Initial		Family Name	MÜLLER		Suffix e.g. Jr.	
Inventor's Signature									Date		
Residence: City	Obertschausen				State		Country	Germany		Citizenship	DE
Post Office Address	Adenauerstrasse 4										
Post Office Address											
City	Obertschausen				State		ZIP	D-63179		Country	Germany

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Steffen				Middle Initial		Family Name	PFISTER		Suffix e.g. Jr.	
Inventor's Signature									Date		
Residence: City	Langen				State		Country	Germany		Citizenship	DE
Post Office Address	Elsa-Brandström-Strasse 13										
Post Office Address											
City	Langen				State		ZIP	D-63225		Country	Germany

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name					Middle Initial		Family Name			Suffix e.g. Jr.	
Inventor's Signature									Date		
Residence: City					State		Country			Citizenship	
Post Office Address											
Post Office Address											
City					State		ZIP			Country	

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name					Middle Initial		Family Name			Suffix e.g. Jr.	
Inventor's Signature									Date		
Residence: City					State		Country			Citizenship	
Post Office Address											
Post Office Address											
City					State		ZIP			Country	

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name					Middle Initial		Family Name			Suffix e.g. Jr.	
Inventor's Signature									Date		
Residence: City					State		Country			Citizenship	
Post Office Address											
Post Office Address											
City					State		ZIP			Country	

<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto.											
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